between conservation and investments in renewable, nonrenewable, and nuclear sources. We never lost sight of our responsibility for the health and vitality of our environment.

H.R. 4 places confidence in America's ability to develop technologies and market incentives to address our energy need in an environmentally safe and cost-effective manner. Americans rely on clean, abundant, and affordable energy, Mr. Speaker. All of us want a strong economy and a clean, healthy environment.

Last night, this House reaffirmed its commitment to these principles. Further, last night's vote was more than drilling for oil or CAFE standards or gasoline additives.

We refused to reward oil-producing nations openly hostile to the United States of America. We said no to OPEC's political whims in setting the world price for oil. We said no to taking away consumer choice in preference and safety that would have eliminated tens of thousands of jobs, good jobs, Mr. Speaker, for American workers.

We did much more. We created a balanced strategy for America's national economic security and environmental need. We laid the groundwork to break this Nation's dangerous dependency on foreign oil through investments in alternative and renewable energies such as fuel cells, wind, solar, geothermal, biomass, and fusion energy.

We spoke up, Mr. Speaker, for those in our society whose voice is seldom heard, poor, low-income Americans, by reauthorizing and improving upon the Low-income Home Energy Assistance Program, the so-called LIHEAP program, and weatherization programs.

Mr. Speaker, we approved H.R. 4 last night. It is a responsible, balanced energy strategy which recognizes the need for conservation, alternative energy, and a healthy environment. This was a great day for America. It was a critical day for Marylanders, particularly, and for all Americans.

Mr. Speaker, I yield to my friend, the gentleman from the great State of Arizona (Mr. HAYWORTH).

Mr. HAYWORTH. I thank my colleague for yielding to me, Mr. Speaker, and I appreciate his remarks on legislation on energy.

One other part of that legislation had to do with the Buy Indian Act for the first Americans, involving the first Americans in energy transmission and production, and a myriad of other activities that will help bring economic vitality to the reservations and sovereign nations.

CONCERN ABOUT SIDS AND NATIVE AMERICAN TRIBES

Mr. HAYWORTH. Mr. Speaker, I rise tonight to speak of another concern shared by all Americans, but especially the first Americans. That would be SIDS, or Sudden Infant Death Syndrome. SIDS can happen to any family and is one of the major causes of death in babies from 1 month to 1 year of age.

SIDS is used to describe the unexplained death of an infant, and the cause of this condition is not known at this time. Researchers continue to investigate this mysterious and tragic syndrome

Congress has a special trust responsibility to assure the highest possible health status for Native Americans. Despite this trust responsibility, Native Americans and Alaska natives continue to bear a disproportionate burden of illness and premature mortality in comparison with other populations in the United States.

I am extremely concerned about SIDS because this tragic syndrome is the leading cause of infant mortality among Native Americans and Alaska natives.

CONCERN ABOUT SIDS AND NATIVE AMERICAN TRIBES

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Arizona (Mr. HAYWORTH) is recognized for 5 minutes.

Mr. HAYWORTH. Mr. Speaker, specific risk factors have been identified, and through identification and implementation of learned actions, there is a potential reduction in the incidence rate of SIDS by up to 40 percent. Infant mortality rates among Native Americans in Indian Health Service areas was 9.3 versus 7.6 in the United States for all races.

Now, understand that among Native Americans, that means the incidence of infant mortality is 22 percent higher. The areas in Tucson, Aberdeen, and Nashville exceeded the U.S. rate by over 50 percent. Infant mortality for SIDS in Indian Health Service areas average 2.3 times greater than all races in the United States, and three times the Caucasian rate.

As I mentioned earlier, Mr. Speaker, the cause of SIDS is not known at this time. Researchers continue their important work to investigate and to understand and to try to prevent this syndrome. It is known that behavior modification and risk factor awareness has proven to reduce the incidence of SIDS by up to 40 percent.

Mr. Speaker, we must look to partner with the Indian Health Service, Indian Health Service Area Health Boards, Tribal health departments, and Tribal Councils to develop culturally sensitive national, regional, and local SIDS risk reduction education programs. We must develop tribally sensitive behavior modification models in tribal-specific formats, improving communication and education to high-risk mothers and caregivers.

Mr. Speaker, I would commend such organizations as CJ Foundation for SIDS as a model to raise awareness of the steps to reduce the risks of SIDS and to decrease the frequency of SIDS-related deaths.

As indicated in recent study by the Center for Disease Control and Prevention, the disparity between the health

of Native Americans and the rest of the population is ever widening.

Mr. Speaker, we must work for public health for the special Tribal trust relationship between the Government of the United States and the sovereign Indian nations to help solve this problem, which falls disproportionately on the first Americans.

LEAVE OF ABSENCE

By unanimous consent, leave of absence was granted to:

Mr. THOMPSON of California (at the request of Mr. GEPHARDT) for today after 9:15 p.m. and the balance of the week on account of family business.

SPECIAL ORDERS GRANTED

By unanimous consent, permission to address the House, following the legislative program and any special orders heretofore entered, was granted to:

(The following Members (at the request of Mr. Pallone) to revise and extend their remarks and include extraneous material:)

Mr. DAVIS of Illinois, for 5 minutes, today.

Mr. PALLONE, for 5 minutes, today.

Mr. BROWN of Ohio, for 5 minutes, today.

Ms. MILLENDER-McDonald, for 5 minutes, today.

Ms. Brown of Florida, for 5 minutes, today

Mr. HOLDEN, for 5 minutes, today.

(The following Members (at the request of Mr. HAYWORTH) to revise and extend their remarks and include extraneous material:)

Mr. HORN, for 5 minutes, today.

 $\operatorname{Mr.}$ Ramstad, for 5 minutes, today.

Mr. Hunter, for 5 minutes, today.

Mr. Hutchinson, for 5 minutes, today

Mr. Ehlers, for 5 minutes, today.

Mr. Ehrlich, for 5 minutes, today.

Mr. TANCREDO, for 5 minutes, today.

Mr. HAYWORTH, for 5 minutes, today. (The following Member (at his own request) to revise and extend his re-

request) to revise and extend his remarks and include extraneous material:)

 ${
m Mr.}$ McDermott, for 5 minutes, today.

SENATE BILL REFERRED

A bill of the Senate of the following title was taken from the Speaker's table and, under the rule, referred as follows:

S. 494. An act to provide for a transition to democracy and to promote economic recovery in Zimbabwe; to the Committee on Frinancial Services; in addition to the Committee on International Relations for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.

ADJOURNMENT

Mr. HAYWORTH. Mr. Speaker, I move that the House do now adjourn.